

Toddler Development- Third Edition (Bayley-III) at their first, second and third years of life. Parents' predictive variables, evaluated during the period of time in which their children were hospitalized in the Neonatal Intensive Care Unit (NICU), were parents' mental health (postpartum depression, anxiety and general symptoms), postnatal bonding, and obstetric variables. To analyze the study's dependent variables, step linear regression models (cognition, receptive and expressive language, fine and gross motor skills) at first, second and third year were employed.

Results: Parents' mental health, especially phobic anxiety in fathers and paranoid ideation in mothers, as well as postnatal maternal bonding, significantly predicted neurodevelopmental difficulties in children during their first three years of life. Children's gestational age at birth and fathers' obsessive-compulsive symptoms predicted neurodevelopmental difficulties in several models, although not as expected, in a counterintuitive manner. In terms of cognition and fine motor skills, the model's predictors were not significant at age three.

Conclusions: According to our results, we consider an early mental health intervention for parents of newborns in need of hospitalization at the NICU to be of major importance. This intervention should be implemented during the hospitalization period, focusing on both parents (father included) and addressing bonding issues from a preventive perspective.

Disclosure of Interest: None Declared

EPV1468

Self-care behaviours and psychological health of university staff

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Introduction: Mindfulness involves being aware of both your thoughts and emotions as well as your surroundings. Regular practice of mindful self-care can enhance the overall well-being. For university staff, these practices can help counteract negative effects on mental health.

Objectives: Our study aims to evaluate the practice of mindful self-care and its impact on the psychological health of university staff.

Methods: We conducted a descriptive, analytical and cross-sectional survey among university staff. The survey was carried out during a one-day training session on mental health promotion using a self-administrated questionnaire. We collected socio-professional data. We assessed psychological health using the depression anxiety and stress scale (DASS 21) and self-care behaviours using Mindful Self-Care Scale (MSCS).

Results: Our study included 65 participants, 67.7% of whom were female. The average age was 53±6.8 years, and the average job tenure was 21.3±8 years. We found that 36.9% of participants experienced mild to moderate stress, 35.4% had mild to moderate depression, 7.7% had severe to extremely severe depression, and 23.1% had severe to extremely severe anxiety.

The average mindful self-care score was 102.8±26.3. The means for specific aspects of mindful self-care were: mindful relaxation 12.6

±4.5, physical care 19.9±5.6, self-compassion and purpose 20.7±7.6, supportive relationships 15.4±5.6, supportive structure 13.4±4.6, and mindful awareness 14.5±4.8.

We found a negative correlation between anxiety and depression and mindful self-care ($p = 0.02$, $r = -0.2$). In female participants, stress was also negatively correlated with mindful self-care ($p = 0.02$, $r = -0.3$).

Conclusions: According to our findings, mindful self-care may be a potential strategy for anxiety, depression and stress management available to university staff. Given the considerably poor psychological health in the study population, we recommend to increase awareness of mindful self-care in university staff.

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Felt presence and its determinants in young adults: Results from three independent samples

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Introduction: Felt presence (FP) is a phenomenon that might appear in individuals with mental and neurological disorders as well as those without any specific morbidity. Some studies have indicated that FP is closely related to psychotic symptomatology. Yet, the mechanisms underlying its occurrence remain largely unknown.

Objectives: The present study aimed to investigate whether FP is associated with widely known risk factors of psychosis.

Methods: Data from three independent samples of non-clinical young adults were analyzed. Self-reports were administered to assess psychopathological symptoms (samples 1 – 3), neurodevelopmental risk factors for psychosis (sample 1), social defeat components (sample 2), childhood trauma, and loneliness (sample 3). A total of 4782 individuals were surveyed across all three samples.

Results: Unadjusted analyses showed that the following factors are associated with higher odds of FP: obstetric complications, childhood trauma, non-right-handedness, a lower education level, unemployment, minority status, humiliation, perceived constraints, and loneliness. However, only minority status and a lower level of education were associated with higher odds of FP after adjustment for other psychopathological symptoms, age, and gender. Importantly, hallucination-like experiences across all recorded modalities and paranoia were associated with higher odds of FP in all samples. Depressive symptoms were weakly associated with FP in two samples.

Conclusions: Findings from the present study suggest that the majority of known risk factors for psychosis contribute to the emergence of FP through the effects on psychotic experiences. Low educational attainment and minority status might be the only risk factors independently contributing to the emergence of FP.

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